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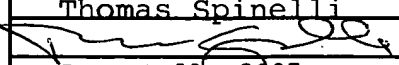
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Thomas Spinelli (Depositor's name)
 (Signature)
August 11, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/723,224	11/26/2003	Satoshi Otsuka	17281	9183

TITLE OF INVENTION: MEDICAL APPARATUS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	10/13/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
MACK, RICKY LEVERN	2873	359-819000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
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1 Scully, Scott
2 Murphy & Presser
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

OLYMPUS CORPORATION

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature 
Typed or printed name Thomas Spinelli

Date August 11, 2005
Registration No. 39,533

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